

## PART B - FEE(S) TRANSMITTAL

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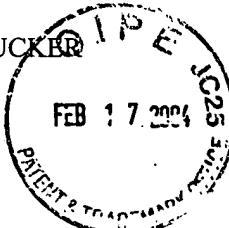
**Mail Stop ISSUE FEE  
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007663 7590 12/24/2003

**STETINA BRUNDA GARRED & BRUCKER  
75 ENTERPRISE, SUITE 250  
ALISO VIEJO, CA 92656**



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

**Sarah E. Gundert**

(Depositor's name)

*Sarah E. Gundert*  
February 13, 2004

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/619,873      | 07/15/2003  | Calin I. Ciobanu     | BEARM-093A          | 7476             |

TITLE OF INVENTION: MULTI-STAGE VARIABLE ORIFICE FLOW OBSTRUCTION SENSOR

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$300           | \$1630           | 03/24/2004 |
| EXAMINER       | ART UNIT     |           | CLASS-SUBCLASS  |                  |            |
| MACK, COREY D  | 2855         |           | 073-861520      |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**I, STETINA, B RUNDA  
GARRED & BRUCKER**

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**VIASYS Healthcare,  
Critical Care Division**

**Yorba Linda, California**

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

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Issue Fee

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(Date)

*2/13/04*

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02/20/2004 MBERHE1 00000088 10619873

01 FC:1501

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03 FC:8001

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